

Completing the Maine EMS
APPLICATION FOR TESTING AND
FOR
A NEW LICENSE TO PRACTICE EMS PATIENT CARE

The *Application for Testing and for a New License to Practice EMS Patient Care* is used at all license levels to apply for and record the results of Maine EMS State Written and Practical Exams and to apply for a (new) Maine EMS license. You may obtain an application from your regional office or download it from the Maine EMS website at: www.maine.gov/dps/ems

For Application to an Exam: Complete sections 1 – 9 and 13 – 16 (as applicable), sign the application (in ink) and submit it to the regional EMS office in the region in which you'll be completing the exams. Make sure to include a check or money order for the required exam fees (see below).

If you are applying for the First Responder or EMT-Basic exam, include your completed National Registry application

Examination Fees

1. Following is a list of examination fees for each level of the Maine EMS written and practical exam:

First Responder	- \$ 80.00 (\$20.00 - written portion and \$60.00 - practical portion)
EMT-Basic	- \$ 80.00 (\$20.00 - written portion and \$60.00 - practical portion)
EMT-Intermediate	- \$100.00 (\$20.00 - written portion and \$80.00 - practical portion)
EMT-Paramedic	- \$100.00 (\$20.00 - written portion and \$80.00 - practical portion)

2. For applicants for examination at the First Responder and EMT-Basic level:

YOU MUST ATTACH TWO CHECKS TO YOUR APPLICATION

- Check #1, in the amount of \$60.00, payable to: *Treasurer of State*.
- Check #2, in the amount of \$20.00, payable to: *National Registry of EMT's*.

3. For applicants for examination at the EMT-Intermediate, Critical Care, or Paramedic level:

- One check, in the amount of \$100.00, made payable to: *Treasurer of State*.

Completion of Exam Process

Once you have successfully completed the Maine EMS exam process, the application is returned to you with the training and testing sections completed.

You will then mail the application to Maine EMS, along with a check made payable to *Treasurer of State* in the amount of \$15.00 (to cover the cost of the mandatory criminal background check for all applications received by Maine EMS on or after July 1, 2003).

Mail your application to MaineEMS, 16 Edison Drive, Augusta, ME 04330.

Questions

Should you have questions regarding the examination process, please contact your regional office or Maine EMS (at the numbers listed below):

Region 1 Donnie Carroll
Southern Maine EMS
10 Vocational Drive
South Portland, ME 04106
Tel. (207) 741-2790
Fax (207) 741-2158

Region 2 Joanne LeBrun
Tri-County EMS
300 Main Street
Lewiston, ME 04240
Tel. (207) 795-2880
Fax (207) 795-2883

Region 3 Rick Petrie
Kennebec Valley EMS
71 Halifax Street
Winslow, ME 04901
Tel. (207) 877-0936
Fax. (207) 872-2753

Region 4 Rick Petrie
Northeast EMS
354 Hogan Road
Bangor, ME 04401
Tel. (207) 942-4669
Fax. (207) 942-3237

Region 5 Jim Caron
Aroostook EMS
22A Birdseye Ave
Caribou, ME 04769
Tel. (207) 492-1624
Fax. (207) 492-0342

Region 6 Bill Zito
Mid-Coast EMS
Thompson Comm. Ctr.
PO Box 610
Union, ME 04862
Tel. (207) 785-5000
Fax. (207) 785-5002

Maine EMS
16 Edison Drive
Augusta, ME 04330
Tel. (207) 287-3953
Fax (207) 287-6251
TTY (207) 287-3659

Completing the National Registry

First Responder Application/Answer Sheet

USE A NUMBER TWO PENCIL AND PRINT CLEARLY

Student Completes:

Side 1: Be sure to complete all boxes necessary and also the corresponding bubbles.

- 1) Exam Series – leave blank.
- 2) Date of Exam.
- 3) Sex & Grade or Education are optional and you do not need to complete.
- 4) Your Social Security number (*Proctor's note: If the candidate refuses to disclose his/her social security #, the NREMT will assign a unique identifier number*).
- 5) The Course Completion date for last course taken
- 6) Please read and complete the information in the signature box to the right of the application

Side 2: Be sure to complete all boxes necessary and also the corresponding bubbles

- 1) Last Name first followed by first name and middle initial.
- 2) Ethnic Origin is optional and you do not need to complete.
- 3) Your date of birth.
- 4) Mailing address should be the address to which you want your testing results sent.
- 5) Remember to include zip code
- 6) This application is also your answer sheet

Administrator completes:

Side 1

- 1) For Office Use Only Test Site Code & State (This is the code assigned to the instructor of the course by the regional office, e.g. 321-ME)
- 2) Sign your name as “assignee” in the signature box to the right side of the application. Be sure to avoid making marks in the body of the answer sheet as it could affect the scanner’s ability to interpret the data.
- 3) Instruct student to return to side 1 and to use that side as the answer sheet

Completing the National Registry EMT-B Exam Application

USE A NUMBER TWO PENCIL AND PRINT CLEARLY

Student completes:

- 1) Complete the top section referring to the location and date of exam.
- 2) Application date is the date on which you completed the application.
- 3) Complete the bubble that corresponds with whether you have ever applied to the NREMT for registration.
- 4) Complete the name/address/gender/DOB.
- 5) Program code (This is the code assigned to the instructor of the course by the regional office, e.g. 321-ME)
- 6) Initial training agency is sponsor of your course.
- 7) Initial Instructors name and completion date of course with length in hours —**OR**— Refresher Instructors name and completion date of course with length in hours.
- 8) The next four boxes are optional and pertain to your education, EMS Career, Ethnic Origin
- 9) **FELONY STATEMENT MUST BE COMPLETED**. Read and complete appropriate Bubble. Attach any documents necessary if you answer “yes”.
- 10) Read and sign statement of understanding.

Completing the National Registry

Assessment Application/Answer Sheet

USE A NUMBER TWO PENCIL AND PRINT CLEARLY

Student Completes:

Side 1: Be sure to complete all boxes necessary.

- 1) Exam series & booklet number will come directly from the cover of the test booklet.
- 2) Today's Date.
- 3) Test Date is the date on which you take the exam.
- 4) Your Social Security number (*Proctor's note: If the candidate refuses to disclose his/her social security #, the NREMT will assign a unique identifier number*).
- 5) Please sign where it says ***your signature***.

Side 2: Be sure to complete all boxes necessary and also the corresponding bubbles.

- 1) Last Name first followed by first name and middle initial.
- 2) Your Social Security Number (*Proctor's note: If the candidate refuses to disclose his/her social security #, the NREMT will assign a unique identifier number*).
- 3) Your date of birth.
- 4) This application is also your answer sheet.

Administrator completes:

Side 1:

- 1) Test Site Code & State (This is the code assigned to the instructor of the course by the regional office, e.g. 321-ME).
- 2) Exam Series may be found on the front cover of the exam test booklet.
- 3) Instruct student to return to side 1 and to use the answer sheet on that side to complete the exam.